Appropriations Committee Public Hearing February 20, 2009

Topic: Opposing the Proposed Closure of Cedarcrest Hospital

Presenter: Daniel C. Hall, Mental Health Assistant at Cedarcrest

Good afternoon co-chairs Harp Representative Garagosian, and other members of the Appropriations Committee. My name is Daniel Hall and I am a Mental Health Assistant at Cedarcrest Hospital. I am here to speak on behalf of District 1199 and in particular the members at Cedar Ridge Hospital and to talk about the unique services we provide to Greater Hartford.

We want this committee to know that closure would harm not only the patients but the entire Greater Hartford area, which is already reeling from the economic downturn. Each patient is an individual member of the community and what affects them has a ripple effect on their spouses, their co-workers, their fellow parishioners or congregants. Hilary Rodham Clinton once quipped:" It takes a village to raise a child." well at Cedarcrest believe it takes a village to treat or heal the mentally ill.

We are opposed to the closure because there is no other state run facility of this size serving Greater Hartford. The economic impact of such a move would go beyond the 400 or so employees and their families but to the hundreds of other jobs that are directly or indirectly supported by the hospital. Cedarcrest is an inpatient state psychiatric facility for adults on two separate campuses. Cedar Ridge and Blue Hills. Cedar Ridge Mental Health Service operates at or near capacity. It has 103 beds and in FY 08 the average daily census was 101.3. During this time frame there were 167 admissions and 163 discharges. The mean length of stay was 183 days - the median was 109 days.

The Hartford facility, Blue Hills Substance Abuse Service, has two distinct units The Acute/Detoxification unit provides care to clients whose drug/alcohol withdrawal signs and symptoms are sufficiently severe to require primary medical and nursing care services. This program offers safe withdrawal from alcohol and other drugs, and prepares the client for ongoing treatment of his or her dependence. Admissions are accepted 24 hours a day. The Intensive Rehabilitation unit offers 24-hour intensive rehabilitative addiction services to establish, support, and promote recovery. This program has the capacity to provide health monitoring and to serve clients whose medical or behavioral health conditions are stabilized, but are in need of frequent monitoring to maintain their health status. The treatment is directed toward developing the skills and knowledge useful in managing chemical dependency and any concurrent psychiatric disorder conditions identified by the treatment team.

Blue Hills Hospital also operates at or near its 42 bed capacity. Its average daily census in FY 08 was 38.2. There were 1379 admissions. The mean length of stay was 5 days - the median was 10.4 days.

After reviewing Gov.Rell's proposed budget, it is obvious to me and my co-workers that whomever drafted it had little if any idea about the services we provide at Cedar Ridge and to whom these services go. Cedar Ridge has three specialty units. It's **Young Adults Program** provides age specific services to those who've aged out of children's service, that is they are between the ages 18 and 25, clearly a very at risk population. **The Latino Monolingual Mental Health Service** provides a range of services for Spanish speakers. **The Transitional Supervised Living Program** offers intensive rehabilitation services for individuals facing serious obstacles to community re-entry.

Cedar Ridge provides acute and sub acute care to individuals suffering from a variety of psychiatric and mental health ailments including: Anxiety Disorders, schizophrenia, Anorexia Nervosa, Bulimia, Borderline Personality Disorder, Traumatic Brain Injury, Acquired Brain Injury, Drug and Alcohol Addictions, Dementia due to illness or injury, Pervasive Developmental Disability, Obsessive Compulsive Disorder, Oppositional Defiance Disorder, varying degrees of Mental Retardation, Post Traumatic Stress Disorder some of whom are veterans of recent and ongoing conflicts in the Middle East. We have people with severe behavioral issues as well as Antisocial and Sociopathic tendencies. We care for people at various ends of the Autistic spectrum and differing developmental stages.

In closing I want to reiterate the importance of keeping the Cedar Ridge campus open in order to facilitate the care that is so desperately needed in the Greater Hartford area. These beds need to stay in the Greater Hartford area so treatment can continue to be provided to individuals whose care would be less intensive and successful elsewhere. Closing Cedar Ridge would not be cost effective from a healthcare or an economic standpoint especially considering the extent to which its services are the critical factor in preventing mental health problems from becoming criminal problems. Cedar Ridge is for many in our community the last best bastlon of hope, it is my fervent desire that our message resonate in the hearts and minds of this committee and that we are not seen as mere pontification in some perverse horse and pony show.